FORM D

FEB 2 7 2007 FORM D

NOTICE OF SALE OF SECURITIES 27 PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00

SEC USE ONLY
Prefix Serial
DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
February 8, 2007 Filing Under (Check box(es) that apply):	E
A. BASIC IDENTIFICATION DATA	07047053
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) RUSSELL INDUSTRIES, INC.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephore 66 Mill Point Place, The Woodlands, TX 77380 (713) 44	one Number (Including Area Code) 6-7231
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Teleph (if different from Executive Offices)	none Number (Including Area Code)
Brief Description of Business	
Mining	PROCESSED
Type of Business Organization Corporation Dimited partnership, already formed Dusiness trust Dimited partnership, to be formed Other (please special partnership)	Wildli .
Month Year Actual or Estimated Date of Incorporation or Organization: O 2 9 7 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	FINANCIAL

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

– ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA		
	quested for the fol	lowing:			
 Each beneficial own 	ner having the pow	er to vote or dispose, or dis	ect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
Each executive off	icer and director of	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
• Each general and n	nanaging partner of	f partnership issuers.			
		Description Owner	☑ Evecutive Officer	[7] Director	General and/or
<u> </u>		A peneticial Owner	V Excente officer		Managing Partner
Enter the information requested for the following: Bach promoter of the issuer, if the issuer has been organized within the past five years; Bach beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Heck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Ill Name (Last name first, if individual) Neck Borman Individual) Neck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Individual) Distincts of Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Individual) Distincts of Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Individual) Distincts of Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Poli Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual)					
			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first, i	f individual)		-		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first,	f individual)	.,,			
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)	····	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first,	if individual)			, .	
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first,	if individual)			<u></u> .	
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
	(Use bla	ank sheet, or copy and use	additional copies of this	sheet, as necessary)

				13. The said	📜 B. dN	FORMATIO	ON ABOU	OFFERIN	iG			*(* ; ¹)	No.
1.	Has the i	ssuer sold	, or does th	e issuer int	end to sel	l, to non-ac	credited in	vestors in	this offerin	ıg?	***************************************	Yes	No ⊠
••				Answ	er also in	Appendix,	Column 2,	if filing u	nder ULO	Ε.		40.6	000 00
2.	What is	the minim	um investm	ent that wi	ll be accep	ted from a	ny individu	al?	•••••••	••••••		\$_10,0	
,	Dogg the	offering r	ermit joint	ownership	of a singl	e unit?					······	Yes ⋉	No
3. 4.	Enter the	informati	ion request	ed for each	nerson w	ho has beer	or will b	e paid or g	iven, direc	tly or indi	rectly, any	_	
	commiss if a perso or states, a broker	ion or simi on to be list list the na or dealer,	lar remuner ted is an ass me of the b you may so	ration for so ociated per roker or der et forth the	olicitation son or age aler. If mo	of purchase nt of a broke re than five	rs in conne er or deale: (5) person	ction with: registered s to be liste	sales of sec with the Si ed are assoc	urities in th EC and/or v	with a state		
Ful	i Name (L	ast name	first, if indi	vidual)									
Bu	siness or I	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)					_	-
Na	me of Ass	ociated Br	oker or De	aler		· -·							
Sta			Listed Has										
	(Check	"All States	" or check	individual	States)	,,,					.,	☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI MS	ID MO
	IL DAT	NE	ĪĀ NV	KS NH	NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	OR	PA
	MT RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	II Name (I	Last name	first, if ind	ividual)				_		-	<u> </u>		
Bu	isiness or	Residence	Address (Number an	d Street, C	City, State, 2	Zip Code)				<u> </u>		
NE	ime of Ass	sociated B	roker or De	aler	<u></u>		<u> </u>						
St			Listed Ha										
	(Check	"All State	s" or check	individual	States)	•••••			*************	•••••	**************	☐ Al	l States
	AL	AK	ĀŽ	AR	CA	CO	CT	DE	DC	FL	GA (VA)	HI	ID MO
		IN N	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	PA
	MT RI	NE SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	ull Name (Last name	first, if inc	lividual)				<u> </u>					
B	usiness or	Residenc	e Address (Number an	d Street, (City, State,	Zip Code)		<u>-</u>				
Ñ	ame of As	sociated B	roker or De	ealer		.		· · · · · · · · · · · · · · · · · · ·					
Si	tates in W	hich Perso	n Listed Ha	as Solicited	or Intend	s to Solicit	Purchaser	5					
	(Check	"All State	s" or check	c individua	l States)				.,			. A	II States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	
	IL	IN	IA	KS	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	MT]	NE SC	NV SD	NH TN	TX	UT	VT	VA	WA	WV	WÏ	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Alexador
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	s
	Equity	§ 1,000,000.00	\$_322,000.00
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests	s	\$
	Other (Specify)		
	Total	<u>\$_1,000,000.00</u>	\$ _322,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	7	§ 322,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	7	\$ 322,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		s
	Rule 504	Common Stock	\$_322,000.00
	Total		\$ 322,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ 690.00
	Printing and Engraving Costs		\$
	Legal Fees		\$ 7,750.00
	Accounting Fees		\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	U	\$
	Total	_	s 8,440.00

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	-Question 4.a. This difference is the "adjusted	gross	991,560.00
i.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ony purpose is not known, furnish an estimat of the payments listed must equal the adjusted	e and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		3 50,000.0C	S 11,612.50
	Purchase of real estate		[] \$	 \$
	Purchase, rental or leasing and installation of ma	achinery		□\$
	Construction or leasing of plant buildings and fa			_
	Acquisition of other businesses (including the va offering that may be used in exchange for the assissuer pursuant to a merger)	sets or securities of another	 	T\$ 100,000.00
	Repayment of indebtedness			
	Working capital			
	Other (specify):		s	\$
			 	s
	Column Totals		350,000.00	\$ 641,560.00
	Total Payments Listed (column totals added)			1,560.00
ł,		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by th nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exchange Co	ommission, upon writte	
SS	uer (Print or Type)	Signature	Date	
RI	JSSELL INDUSTRIES, INC.	1 Ky SV	February 7, 200	7
	me of Signer (Print or Type)	Title of Signer (Print or Type)	<u></u>	·

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

APPENDIX											
1	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL							·				
AK									<u></u>		
AZ											
AR											
CA											
СО											
CT					-						
DE											
DC											
FL		X	Common Stock	2	\$100,000.00				×		
GA				ļ <u>.</u>							
ні					_						
ID						· · · · · · · · · · · · · · · · · · ·					
IL_									L		
IN		. Lines president process produces									
IA											
KS											
KY					<u> </u>						
LA	made and a sort first Freedom by Comments of										
ME											
MD											
MA											
MI											
MN		×	Common Stock	3	\$122,000.00				×		
MS											

		The state of the s		APP	ÉNDIX 🥍		Specific Control of the Control of t			
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Finvestor and rchased in State C-Item 2)		5 Disqualificat under State UI (if yes, attac explanation waiver grant (Part E-Item		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
мо										
МТ										
NE										
NV										
NH	<u> </u>									

NJ

NM

NY NC

ND

OH

OK

OR

PA

RI

SC

SD

TN

TX

UT

VT

VA

WA

 $\mathbf{w}\mathbf{v}$

WI

\$100,000.00

X

3

Common Stock

X

I		2	3	APP	5 Disqualification					
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and irchased in State : C-Item 2)		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										